CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT DETECONOMIC INTERESTS PRACTICES COVER PAGE

REGISTRATION AND ELEGIADAS DAY Official Use Only

2012 FEB 24 PM 4: 52

STANISLAUS COUNTY



Please type or print in ink.	2012 FEB 28	PM 2: 53	S TANISLAUS COUNT
NAME OF FILER (LAST)		(FIRS	T) ULL (MIDDLE) LUTUER
DeMartini	Jlr	m	R.
1. Office, Agency, or Court			
Agency Name			
Board of Supervisors			
Division, Board, Department, District, if applicable		Your	Position
District 5	· · · · · · · · · · · · · · · · · · ·	Su	pervisor
▶ If filing for multiple positions, list below or on a	n attachment.		,
Agency: see attachment		Pos	ition:
2. Jurisdiction of Office (Check at least of	ne box)		
State	10 2011	□ Juc	dge or Court Commissioner (Statewide Jurisdiction)
_			·
Multi-County			unty of
City of			ner
3. Type of Statement (Check at least one b	ox)		
Annual: The period covered is January 1, 20 December 31, 2011.	011, through		vaving Office: Date Left//// Wheck one)
-or- The period covered is/	, throu	gh O	The period covered is January 1, 2011, through the date of leaving office.
Assuming Office: Date assumed/		0	The period covered is/, through the date of leaving office.
Candidate: Election Year	Office sought,	if different than P	art 1:
4. Schedule Summary			1.2
Check applicable schedules or "None."	▶ 7	otal number o	of pages including this cover page:
Schedule A-1 - Investments – schedule attacl	har	✓ Cabadul	e C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedule attack			e D - Income - Gifts - schedule attached
★ Schedule B - Real Property – schedule attack ★ Schedule B - Real Property – schedule attack	•	_	e E - Income - Gifts - Travel Payments - schedule attached
	-or-		,
□ N	one - <i>No reportable i</i>	interests on any s	chedule
herein and in any attached schedules is true and o	complete. I acknowle	edge this is	
I certify under penalty of perjury under the law	s of the State of Cal	lifornia tha	
Date Signed Fox 21, 2012 (mbnth, day, year)		Signatu	

STATEMENT OF ECONOMIC INTERESTS

Jim De Martini

Cover page attachment

1. Office, Agency, or Court filing for multiple positions

1. Board of Supervisors

Supervisor

2. LAFCO

County member

3. Mountain Valley EMS

Director

4. Stanislaus Co. Retirement Association

Trustee

5. EDAC

County Member

6. STAMBLES - CERES ROAT. CLEVIL - RECORDE

COMMENER SU COUNTS NO

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Brightpoint	Caterpillar
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
wholesale electronics	machinery
FAIR MARKET VALUE .	FAIR MARKET VALUE
	☐ \$2,000 - \$10,000 X \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
4 / 11 / 11 / / 11	10 / 7 / 11 / / 11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Citigroup	Conoco Phillips
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
bank	Integrated oil and gas
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000	▼ \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT ヌtock □ Other	NATURE OF INVESTMENT
(Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>, , 11 , 11 </u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Hewlett - Packard	Illinois Tool Works
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
computers	diversified machinery
FAIR MARKET VALUE	FAIR MARKET VALUE
⋈ \$2,000 - \$10,000	≥ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
_1 / 18 / 11 / / 11	5 / 26 / 11 / / 11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	
Comments:	

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini

► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
International Paper	Johnson & Johnson
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
paper products	drug manufacturer
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock	Stock Other(Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u> 1 , 18 , 11 </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Prologis Inc.	Research in Motion
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
real estate RETT	diversified communication services
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000	☐ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	<u> </u>
NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
: IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 11 / / 11	1 / 2 / 44
//_11	4 / 3 / 11 / / 11 ACQUIRED DISPOSED
Add into	NOGOINED BIOLOGED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Rite Aid Corp	Staples Inc.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
drug stores	specialty retail
FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	7 / 5 / 11 / / 11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
l	1
Comments:	

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini
· 1

A THE WAY A THE	
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Teva Pharmacy	United Health
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Drug Manufacturing	health care plans
FAIR MARKET VALUE	FAIR MARKET VALUE
x \$2,000 - \$10,000 x \$10,001 - \$100,000	S2,000 - \$10,000 S \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other	NATURE OF INVESTMENT X Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>7 / 5 / 11 / / 11</u>	<u>4 , 20 , 11</u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Wabash National Corp	C. R. Bard, Inc.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
truck trailers	`medical instruments
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	X Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u> </u>	<u> </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Joseph A. Bank Clothiers	Rock - Tenn Co.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
apparel	packaging
FAIR MARKET VALUE	FAIR MARKET VALUE
■ \$2,000 - \$10,000	S2,000 - \$10,000 X \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	X Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe) Partnership (Dincome Received of \$0 - \$499)
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>, , 11 1 18 , 11 </u>	<u>, , 11 2 , 9 , 11</u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	• •

Comments: _

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES CO	MMISSION
Name	
Jim DeMartini	

(Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Computer Sciences Corp.	A. Schulman Inc.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
computer software	specialty chemicals
FAIR MARKET VALUE	FAIR MARKET VALUE
	■ \$2,000 - \$10,000
S100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock ☐ Other	NATURE OF INVESTMENT ヌ Stock □ Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>, , 11 </u>	<u> </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Aux Corp	Goodyear Tire
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
diversified electronics	rubber and plastics
FAIR MARKET VALUE	FAIR MARKET VALUE
	▼ \$2,000 - \$10,000
S100,001 - \$1,000,000 Dver \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF ADDITION OF THE DATE.	US ADDUGADUS LIST DATE.
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u> </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Cemex	Pfizer Inc.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
cement	drug manufacturing
FAIR MARKET VALUE	FAIR MARKET VALUE
<u>\$2,000 - \$10,000</u> <u>\$10,001 - \$100,000</u>	■ \$2,000 - \$10,000 ■ \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
	⊠ Stock
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u>/ / 11 </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED

Comments: __

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini

► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Ebay	ITT Corp.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
mail order house	diversified machinery
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000	▼ \$2,000 - \$10,000
\$100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
▼ Stock □ Other	Stock Other
(Describe)	(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Valero Energy	Abbott Laboratories
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
oil and gas refining	drug manufacturing
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	■ \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	X Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u> 1 / 18 / 11 </u>
	1 1 18 11 12 12 11 11 ACQUIRED DISPOSED
ACQUINED BIOFCOED	ACCOIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
General cable Corp.	Corinthian Colleges Inc.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
industrial electrical equipment	educational sources
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	X \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock ☐ Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u> 1 / 18 / 11 </u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	11
Comments:	

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini
Name

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
American Eagle Outfitters	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
apparel stores	
FAIR MARKET VALUE	FAIR MARKET VALUE
⊠ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	. Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	<u></u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	//
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 11 , , 1 1	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	1
Comments:	

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
DeMartini, Inc.	Pacific Coast Producers
Name	Name
5013 Jennings Road Modesto, CA 95358	P. O. Box 1600 Lodi, CA 95241
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one ☑ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY a farm	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$ 0 - \$1,999
NATURE OF INVESTMENT Sole Proprietorship Partnership Corporation Other YOUR BUSINESS POSITION presidnet	NATURE OF INVESTMENT Sole Proprietorship Partnership Co-opOther YOUR BUSINESS POSITION Grower
FOUR BUSINESS POSITION PROGRAMS	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 ☑ OVER \$100,000 □ \$1,001 - \$10,000	□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 ☒ OVER \$100,000 □ \$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
see attached sheet	see attached sheet
◆ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT 🔀 REAL PROPERTY	□ INVESTMENT REAL PROPERTY 017051035
4545 W. Service Road	Jennings Road
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Modesto, CA 95358	Modesto, CA 95358
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST Stock Partnership	NATURE OF INTEREST ☑ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2011/2012) Sch. A-2

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM	700
Name	
Jim DeMartini	

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
DeMartini, Inc. continued	Allied Grape Growers
Name	Name
	3475 W. Shaw Ave. STE. #103 Fresno, CA
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ ITrust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	grape broker
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$1 \$2,000 - \$10,000	\$0 - \$1,999 \$2,000 - \$10,000 \$10,000
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership	NATURE OF INVESTMENT
Other	Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION Grower
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
S0 - \$499 S10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 \$0VER \$100,000
S500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$500 - \$1,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
◆ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT X REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
3937 Vivian Road	
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Modesto, CA 95358	
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
S2,000 - \$10,000 / / 11 / / 11	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
\$10,001 - \$100,000	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
▼ Property Ownership/Deed of Trust □ Stock □ Partnership	☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property	Yrs. remaining Check box if additional schedules reporting investments or real property
are attached	are attached
Comments:	FPPC Form 700 (2011/2012) Sch. A-2

Jim DeMartini

Form 700

Attachment to Schedule A - 2

2011

Business Entity or Trust: DeMartini, Inc.

#3. List each reportable source of income/loans of \$10,000.00 or more

George Perry and Sons
Allied Grape Growers
Triland Limited Partnership
Pacific Coast Producers
Fisher Nut Company
Quality Nut Company
Morris Dairy Farms
Blossom Hill LLC
Venn Farms
Frank Borba Custom Chopping
E & J Gallo Winery
Gurjeet Hundal
Borges Farms

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 5013 Jennings Road	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
· · · · · · · · · · · · · · · · · · ·	OUTV.
Modesto, CA 95358	CITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / / 11	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
✓ Ownership/Deed of Trust ✓ Easement	Ownership/Deed of Trust Easement
Leasehold Dther	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
DeMartini, Inc.	
	i I
* You are not required to report loans from commercial loans on terms available to members of the public loans received not in a lender's regular course of business of Lender*	ending institutions made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of business.	without regard to your official status. Personal loans and ness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of business of LENDER*	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER*
business on terms available to members of the public loans received not in a lender's regular course of business of Lender* Address (Business Address Acceptable)	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of business of Lender* Address (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) ———————————————————————————————————
business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business regular course regular course of business regular course regular course regular course regular course regular regular course regular course regular course regular regu	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's received not received not in a lender's received not received	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)

SCHEDULE C Income, Loans, & Business **Positions** (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
DeMartini, Inc.	Modesto Symphony
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
5013 Jennings Road Modesto, CA 95358	911 13th Street, Modesto, CA 95354
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
farming	Symphony Orchestra
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
employee	Musician
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000
※ \$10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
_	<u> </u>
Other (Describe)	Other(Describe)
retail installment or credit card transaction, made in the	nding institutions, or any indebtedness created as part of a lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
Anne DeMartini	5 % None 6 months
ADDRESS (Business Address Acceptable)	1010
5013 Jennings Road, Modesto, CA 95358	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
musician	
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
<u>\$500 - \$1,000</u>	Modesto, CA 95358
\$1,001 - \$10,000	_
\$10,001 - \$100,000	Guarantor
☑ OVER \$100,000	Other
	(Describe)
Comments:	

SCHEDULE C Income, Loans, & Business **Positions**(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DeMartini

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
DeMartini, Inc.	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
5013 Jennings Road, Modesto, CA 95358	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
farming	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
loan/investor ·	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000	\$500 - \$1,000 \$1,001 - \$10,000
X \$10,001 - \$100,000 ☐ OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	Sale of
(Reel property, car, boat, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other interest income of spouse	Other(Describe)
(2-1-1-1-2)	,
► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	IOD
* You are not required to report loans from commercial le	ending institutions, or any indebtedness created as part of a
retail installment or credit card transaction, made in the	lender's regular course of business on terms available to
	itus. Personal loans and loans received not in a lender's
regular course of business must be disclosed as follows	S:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	,
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	_
☐ ○ △ 5 € V \$ 100,000	Other (Describe)
	,,
_	
Comments:	